

**WASHINGTON STATE PATROL FIRE PROTECTION BUREAU  
OFFICE OF THE STATE FIRE MARSHAL**

**PYROTECHNIC OPERATOR LICENSE RENEWAL**

This renewal is hereby made to the Washington State Patrol Fire Protection Bureau, pursuant to R.C.W. 70.77, for re-licensing in the State of Washington as a Pyrotechnic Operator. I have enclosed the annual re-licensing fee of \$ 10.00.

**Date Received**

*For Official Use*

**Pyrotechnic Operator Seeking Renewal:**

<b>Name</b>					
<b>Complete Address</b>					
<b>License Number</b>		<b>Home Phone Number</b>		<b>Work Phone Number</b>	
<b>E-Mail Address</b>					

**Four Recent Displays The Pyrotechnic Operator Has Participated In (At Least One To Remain Active):**

<u>DATE OF DISPLAY</u>	<u>LOCATION OF DISPLAY</u>	<u>RESULTS OF SHOW: (DUDS, PROBLEMS, INJURIES)</u>

**Pyrotechnic Operator Background Questions**

**Yes/No**

Have you been cited for state or federal fireworks violations?

\_\_\_\_\_

Have you been convicted of a felony or misdemeanor in the past ten years?

\_\_\_\_\_

Have you ever had a fire or accident as a result of fireworks activity?

\_\_\_\_\_

Have you ever done damage to another's property as a result of fireworks activity?

\_\_\_\_\_

In making this application for renewal, I agree to continue to abide by all requirements of the State Fireworks Law (R.C.W. 70.77) and the rules and regulations (W.A.C. 212-17) of the Washington State Fire Marshal's Office.

I further certify that all information contained in this renewal is true and complete. I understand that omitted or misrepresented information can constitute sufficient grounds for denial or revocation of the license I am applying for.

\_\_\_\_\_  
Signature Of Applicant

\_\_\_\_\_  
Date of Application

Mail your completed renewal and licensing fees to:

Washington State Patrol Fire Protection Bureau  
Post Office Box 42600  
Olympia, WA 98504-2600

*[Please note these licenses are valid from the date of issue until January 31 of the subsequent year.]*